

# **WATER WELL CONTRACTOR'S/DRILLER'S APPLICATION AND EXAMINATION PROCEDURES**

Enclosed are an application form, surety bond, and selected study material for the examination. Please return the completed application form, along with evidence of one year of apprenticeship or equivalent experience, at least ten days prior to the date you wish to take the exam.

The examination may be taken (by appointment only) any weekday, Monday through Friday, in the Board Office, 48 North Last Chance Gulch, Helena. The examination may also be taken at any of the Department of Natural Resources and Conservation Water Resources Regional Offices. Locations are listed on the front of the application form. The examination must be started between 8:00 a.m. and 1:00 p.m. to allow you sufficient time to complete the exam. If you wish to take the exam at a location other than Helena, you will be notified of the proper person to contact for a time and place when you receive notification that your application has been approved.

It is not necessary to file the bond at the time of application. The bond is required for contractors after successful completion of the exam and prior to issuance of the license. A driller is not required to submit a bond, but must be in the employ of a Montana licensed water well contractor.

The contractor's examination contains 200 questions, the driller's examination 120. Both examinations are based on knowledge of Montana law and rules, and drilling practices and cover both cable and rotary rigs. The questions are multiple choice and true or false. The contractors' exam also contains a separate exam relating to monitoring well construction and site safety.

Two manuals published by the National Ground Water Association can be ordered by contacting the National Ground Water Association at 601 Dempsey Road, Westerville, OH 43081-8978, Phone: 800-551-7379/614-898-7791, E-mail: [h2o@h2o-ngwa.org](mailto:h2o@h2o-ngwa.org). The Water Well Driller's Beginning Training Manual costs approximately \$9.50 and the Well Drilling Manual costs approximately \$8.50. These manuals are an excellent study source for the examination. Other suggested materials for study include Johnson's Ground Water and Wells and Well Drilling Operations. Both are available from the National Ground Water Association. The Johnson's book is an excellent reference to have for your business. To study for the monitoring portion, the NGWA has copies of a safety manual for sale entitled, Occupational Safety and Health Guidance Manual for Hazardous Waste Site Activities for \$8.00 for non-members.

The Administrative Rule Book is available from this office upon request and receipt of payment. The cost is \$5.00.

A passing score of 80 percent is required for licensure. If you have any questions, please contact the Board office at (406) 444-6643.

# APPLICATION FOR WATER WELL CONTRACTOR'S OR WATER WELL DRILLER'S LICENSE

Check the type of license for  
which you are applying:

- ☐ Water Well Contractor  
☐ Water Well Driller

Appropriate fee must accompany  
the application.

\$300  
\$250

Check the city in which you wish to take the examination:

\_\_\_\_ Billings    \_\_\_\_ Bozeman    \_\_\_\_ Glasgow    \_\_\_\_ Havre  
\_\_\_\_ Helena    \_\_\_\_ Kalispell    \_\_\_\_ Lewistown    \_\_\_\_ Missoula

Full Name \_\_\_\_\_  
(License will be issued in individual name only, but will show the contractor or firm name)

Firm Name \_\_\_\_\_

If applying for a driller's license, please give  
the name of the contractor for whom you work \_\_\_\_\_

Applicant's Home Address \_\_\_\_\_ Phone \_\_\_\_\_

Applicant's Business Address \_\_\_\_\_ Phone \_\_\_\_\_

Social Security No. \_\_\_\_\_ Date of birth \_\_\_\_\_

Under what Contractor did you serve you apprenticeship? \_\_\_\_\_

Have you ever been licensed as a water well contractor or driller? \_\_\_\_ Yes \_\_\_\_ No

If so, where? \_\_\_\_\_ License number \_\_\_\_\_

What kind of license did you have? \_\_\_\_\_

Your license was valid from 20 \_\_\_\_ until 20 \_\_\_\_ .

Was this license obtained by examination? \_\_\_\_ Yes \_\_\_\_ No

Was your water well contractor's or driller's license ever revoked? \_\_\_\_ Yes \_\_\_\_ No

If so, by whom? \_\_\_\_\_

Give reasons \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The Board will act on the application within 90 days if the application is correct and complete, and the applicant is  
qualified and has paid the appropriate fee. *Nothing contained in this application is confidential*

MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION  
BOARD OF WATER WELL CONTRACTORS

P.O. Box 201601

Helena, Montana 59620-1601

(406) 444-6643



Have you previously applied for a Montana water well contractor's or driller's license?\_\_\_ Yes \_\_\_ No

Have you taken this examination before:\_\_\_ Yes \_\_\_ No

If so, state date, type of application, and results of the examination \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has your bond ever been revoked or forfeited or has action been taken against the bond? \_\_\_ Yes \_\_\_ No

If so, explain. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES:** List at least three (3) people in the water well industry who are familiar with your work and have them supply written verification of their knowledge regarding your work in the contracting or drilling field. Have them give specific information as to the type of work you have performed on site, such as supervision, design, installation, etc. Submit these letters with this application.

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Phone Number \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Phone Number \_\_\_\_\_

How many years have you been working in the water well drilling field? \_\_\_\_\_

1. Have any legal or disciplinary actions been instituted against you which allege impropriety of your past practices or your unfitness to practice? \_\_\_ Yes \_\_\_ No

2. If yes, what was the outcome of the proceedings? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Failure to accurately furnish the information requested in questions 1 and 2 is grounds for denial or revocation of your license.)

# WATER WELL DRILLING EMPLOYMENT RECORD

**IMPORTANT:**

Your application will be delayed unless the complete address of each employer is given.

	DATES EMPLOYED		EXPLAIN WORK
	From Month    year	From Month    year	
<b>PREVIOUS AND PRESENT EMPLOYERS</b>  Name _____ Address _____ City _____ State__ Zip _____ Phone _____			
Name _____ Address _____ City _____ State__ Zip _____ Phone _____			
Name _____ Address _____ City _____ State__ Zip _____ Phone _____			
Name _____ Address _____ City _____ State__ Zip _____ Phone _____			
Name _____ Address _____ City _____ State__ Zip _____ Phone _____			

**CONTRACTOR APPLICANTS:**

What major equipment will you use in your water well drilling business? (Description) [attach additional sheet, if necessary]

Check if you:

	Own	Lease	Other

**DRILLER APPLICANTS:**

What major equipment will you operate if you become a licensed Montana water well driller? (Description)

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## APPLICATION REQUIREMENTS

### WATER WELL CONTRACTOR

To be licensed as a water well contractor, you must supply verification of completion of at least one year of apprenticeship. Verification must be a letter from the contractor you worked for, and it must give the number, general location, and approximate date of wells you've worked on, and the dates of your employment. Technical experience may be accepted on a case by case basis, (36.21.412 Administrative Rules of Montana). A \$4,000 bond is also required if you pass the examination.

### WATER WELL DRILLER

To be licensed, a Water Well Driller must supply verification of completing a one year apprenticeship. (See above information on verification and rule 36.21.412, Administrative Rules of Montana), Drillers also need a letter from a licensed water well contractor that states the driller will be in his employ, and his firm will be responsible for the driller's work.

### OUT-OF-STATE APPLICANTS

Out-of-state applicants must fulfill the same requirements as in-state applicants. The attached form for verification of out-of-state licensure must be completed, signed, and returned by the water well licensing official in any state where you have held a previous water well driller's or contractor's license.

I hereby swear that all the information on this application is true and correct.

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Date

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Signature of Applicant

**Note:** Failure to complete any portion of this application will result in a delay in approval or disapproval. Material misstatements in this application may result in the denial or revocation of your license. If this application is approved by the Board, you will be notified regarding the date and time of the examination.

*Please mail this completed form, appropriate fee, copies of your past licenses, verification letters, and any other information such as verification of technical experience or education to the Board of Water Well Contractors, Department of Natural Resources and Conservation, P.O. Box 201601, Helena, Montana 59620-1601*

# VERIFICATION OF OUT-OF-STATE LICENSURE

The Montana Board of Water Well Contractors is seeking information on the individual whose name appears below.

This form needs to be completed, signed, and returned to this office by the water well licensing agency in the state of prior licensure.

Name of licensee: \_\_\_\_\_

Type of license: Water Well Driller # \_\_\_\_\_

Water Well Contractor # \_\_\_\_\_

Month and year first licensed: \_\_\_\_\_ thorough \_\_\_\_\_

Experience required to obtain license: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Licensed by examination: \_\_\_\_Yes \_\_\_\_No

Examination score \_\_\_\_\_ (state's passing score \_\_\_\_\_)

Licensed by reciprocity with another state: \_\_\_\_Yes \_\_\_\_No

Name of state \_\_\_\_\_

List of complaints filed and outcome: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approximate number of wells drilled during licensure period, if known \_\_\_\_\_

Is license current and in good standing? \_\_\_\_Yes \_\_\_\_No

Please attach a sheet listing other information that would be helpful in evaluating applicant's experience.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of State Licensing Official

Return this form to:

MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION  
BOARD OF WATER WELL CONTRACTORS

P.O. Box 201601

Helena, Montana 59620-1601

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